

District I
 PO Box 1900, Hobbs, NM 88241-1900
 District II
 PO Drawer DD, Artesia, NM 88211-0719
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
 Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
 PO Box 2088
 Santa Fe, NM 87504-2088

Form C-104
 Revised February 10, 1994
 Instructions on back
 Submit to Appropriate District Office
 5 Copies

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address Parker + Parsley Development L.P. P.O. Box 3178 Midland, Texas 79702		OGRID Number 036324
Reason for Filing Code Effective 1-1-95 CH (name change)		Pool Code 75740
API Number 30-015-23675	Pool Name Culebra Bluff Atoka, S GAS	Well Number 1
Property Code 14437	Property Name Nymeyer	

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Line	Feet from the	East/West Line	County
F	15	23S	28E		2310	N	1980	W	Eddy

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Line	Feet from the	East/West Line	County

Lee Code	Producing Method Code F	Gas Connection Date 10-12-81	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date
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III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
007057	EL PASO NATURAL GAS P.O. Box 1492 EL PASO, TX 79978	1023130	G	

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 DIST. 2

IV. Produced Water

POD	POD ULSTR Location and Description
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V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations

Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement
			Post ID 3
			3-10-95
			CHG. OP

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: Shelley Bush
 Printed name: Shelley Bush
 Title: Proration Analyst
 Date: 2-13-95 Phone: 915-571-1265

OIL CONSERVATION DIVISION
 Approved by: SUPERVISOR, DISTRICT II
 Title:
 Approval Date: FEB 20 1995

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date

Submit 3 Copies
 Appropriate District Office
DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
 P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
 1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
 Department of Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
 P.O. Box 2088
 Santa Fe, New Mexico 87504-2088

Form C-104
 Revised 1-1-89
 See Instructions
 at Bottom of Page
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1993 OCT 19

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
 TO TRANSPORT OIL AND NATURAL GAS**

I. OPERATOR

Operator P&P PRODUCING, INC.	Well API No. 30-015-23675
Address P. O. BOX 3178, MIDLAND, TEXAS 79702-3178	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator GRAHAM ROYALTY, LTD., P.O. BOX 4495, HOUSTON, TEXAS 77210	

II. DESCRIPTION OF WELL AND LEASE

Lease Name NYMEYER	Well No. 1	Pool Name, Including Formation CULEBRA BLUFF (ATOKA) S	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>W</u> Line and <u>2310</u> Feet From The <u>N</u> Line Section <u>15</u> Township <u>23S</u> Range <u>28E</u> , <u>NMPM</u> , <u>EDDY</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> SCURLOCK PERMIAN CORPORATION	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 4648, HOUSTON, TX. 77210				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> EL PASO NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1492, EL PASO, TX. 79978				
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 15	Twp. 23	Rge. 28	Is gas actually connected? <u>YES</u> When? <u>10/12/1981</u>

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
						<i>Part ID-3</i>		
						<i>11-26-93</i>		
						<i>chg op</i>		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Harry R. Boren
 Signature HARRY R. BOREN MGR., OPER. ACCTG.
 Printed Name _____ Title _____
 Date 9/23 1993 Telephone No. (915) 683-4768
 Date _____ Telephone No. _____

OIL CONSERVATION DIVISION

Date Approved OCT 20 1993

By MIKE WILLIAMS
 ORIGINAL SIGNED BY
 SUPERVISOR, DISTRICT II

Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.